



Parks, Recreation and Cultural Affairs

1792 County Services Pkwy
Marietta, Ga. 30008

Eddie Canon

Phone: (770) 528-8800 Fax: (770) 528-8814

DIRECTOR

TO: Adult Flag Football Managers
FROM: Derrell Walker, League Coordinator
SUBJECT: 2010 Fall Adult Flag Football Registration
DATE: July 14, 2010

Registration for the upcoming 2010 Fall Adult Flag Football Season will be held the week of August 9th at the Administrative Office at 1792 County Services Parkway in Marietta. The registration fee this year will be \$350.00 per team and will cover the cost of officials, scorekeepers, trophies and equipment. Each team will be responsible for furnishing it's own jerseys and football. All games will be played at Nickajack Park which features a quality playing field, a scoreboard for continuous viewing of time and score and easy access to Interstate 285.

***Attention Ladies, coed play will begin on the week of October 4th and games will be scheduled on Tuesday and/or Thursday nights.**

League play for the Men's leagues will begin in early September and last until late October.

REGISTRATION SCHEDULE

TEAMS WHICH PARTICIPATED IN LAST YEARS PROGRAM :

<u>DATE</u>	<u>TIME</u>	<u>LOCATION</u>	<u>COST</u>
MONDAY – AUG 9	6:00 - 7:00 PM	ADMINISTRATIVE OFFICE	\$350.00
TUESDAY – AUG 10	6:00 - 7:00 PM	ADMINISTRATIVE OFFICE	\$350.00

NEW TEAMS :

WEDNESDAY – AUG 11	6:00 - 7:00 PM	ADMINISTRATIVE OFFICE	\$350.00
THURSDAY – AUG 12	6:00 - 7:00 PM	ADMINISTRATIVE OFFICE	\$350.00

*Schedules will be emailed / faxed on **Tuesday September 7, 2010**. Team meeting will be held prior to the coin toss of your 1st game. Rules and regulations will be explained at this time.

IMPORTANT INFORMATION:

All league play will be governed by the Georgia Recreation and Parks Association by-laws and the National Intramural Recreational Sports Association (NIRSA) rules: seven man, everyone eligible, screen blocking).

A set of by-laws will be given to all coaches at registration. Any questions you may have concerning rules contact Derrell Walker at 770 528-8823 or by e-mail at derrell.walker@cobbcounty.org.

The number of games played will depend on the number of teams entering, however, all teams will play at least seven games.

Returning teams now have the option of registering their team online. In order to do so, you must have played in the 2009 Fall season. Please see online registration instructions below.

Registration for teams that did not play in the 2009 Fall season will be in person **ONLY**. The **FULL** registration fee along with a **COMPLETE** entry form and roster form are due at the time of registration.

Payment will be taken in the form of a cash, check, money order or credit card (Visa or Master Card). Make checks and money orders payable to the Cobb County Parks, Recreation and Cultural Affairs Department (CCPRCAD). Please, **NO MULTIPLE CHECK PAYMENTS**.

Pants with pockets, midriff jerseys which hang within six inches of the waist, or jerseys which cannot be tucked in will **NOT** be allowed for safety reasons.

Each team must have a set of white (Home) jerseys and a set of colored jerseys (Visitor).
T – Shirts with numbers are approved.

Game times during the week will not be set to start before 6:30 PM or after 9:30 PM.

It is the intent of Cobb County Government to comply with the Americans with Disabilities Act. In order that the department assures compliance, if you have a specific physical or service accessibility need, please make the staff who work with the program/facility aware so that we can reasonably accommodate your needs. We want our facilities and programs to be “user friendly” for all participants.

In the event of inclement weather, call the rainout hotline at 770 528-8822 (after 3:00 pm weeknights only). The league coordinator will reschedule games and notify all team managers 48 hours or 2 days prior to the playing date. Teams failing to appear for a make-up game shall forfeit. If you are not notified of a rainout by phone or by message on the hotline, report to the field to play.

Thank you for your interest in our program. If I can be of any assistance, please feel free to call me at 770-528-8823.

ONLINE REGISTRATION INSTRUCTIONS

(For returning teams only)

To register your team online you must have a Login ID # and Pin #. Contact your league coordinator if you have not already received these numbers. Early online registration will open **July 26-August 10 but** you must register for the same league that you played fall 2008.

Please have the following information ready when registering:

1. Log-in ID #, PIN #, and League Barcode
2. Visa or Master Card # and expiration date

How to register:

1. Go to our department website at <http://www.prca.cobbcountyga.gov>
2. Click on the **Online Registration** web link on the side bar
3. Click on the activities tab
4. Type in the league code in the barcode box or select desired search criteria from the pull down menu.
5. Select the desired activity or return to the search page
6. Click ADD to put the league into your basket (the first time you do this, you will be asked to enter your client code and Account PIN)
7. Select the team you wish to register and press the UPDATE MY BASKET button
8. Go to the CHECK OUT button to pay for your team
9. Review the charges and enter payment information as required. Press the complete transaction button.
10. For your confirmation, please print the "registration was successful" page.

Please fax entry form to:

Derrell Walker – 770-528-8814

2010 Fall Adult Flag Football Entry Form

Check all that apply:

- RETURNING TEAM
 NEW TEAM
 RESIDENT TEAM
 NON-RESIDENT TEAM

TEAM NAME _____

MANAGERS NAME _____

PHONE NUMBERS (HOME) _____ (WORK) _____ (CELL) _____

E-MAIL ADDRESS _____

MAILING ADDRESS _____

ASSISTANT MANAGERS NAME _____

PHONE NUMBERS (HOME) _____ (WORK) _____ (CELL) _____

LEAGUE INFORMATION

PLACE A "1" BY YOUR FIRST CHOICE, "2" BY YOUR SECOND CHOICE.

COED LEAGUE (TUESDAY, THURSDAY)

OPEN LEAGUE (TUESDAY, THURSDAY)

B LEAGUE (MONDAY, WEDNESDAY, FRIDAY)

C LEAGUE (MONDAY, WEDNESDAY, FRIDAY)

***UNDERLINED DAY IS THE PRIMARY NIGHT**

MAKE CHECK OR MONEY ORDER PAYABLE TO C.C.P.R.C.A.D.

OFFICE USE ONLY

AMOUNT PAID _____ RECEIPT NUMBER _____ DATE _____

2010 OFFICIAL FLAG FOOTBALL ROSTER

LEAGUE/PARK _____ MGR. SIGNATURE _____

TEAM NAME _____ RESIDENT TEAM _____ NON-RESIDENT TEAM _____

DIVISION: _____ B _____ C _____ COED _____ OPEN _____

The following players will represent my team in the 2010 Fall Flag Football League. These players have agreed to abide by the agreement on the reverse side of this roster, all the rules as outlined in the Constitution and By-laws governing the league, and all policies set up by the Cobb County Recreation Commission. I also understand that if this roster is found to be illegal that this team will be immediately dropped from the league with no refund.

**RELEASE AND HOLD HARMLESS AGREEMENT
PERMISSION TO PROVIDE EMERGENCY MEDICAL TREATMENT**

Realizing the nature of this program, its physical demands and how important it is to follow rules, regulations, and instructions outlined by the staff of the Cobb County Parks, Recreation and Cultural Affairs department, I am, to the best of my knowledge, in good health and able to participate in the program. I authorize the staff of the Cobb County Parks, Recreation and Cultural Affairs Department to organize any required medical or first aid procedure, or to take the undersigned to a hospital emergency room for treatment. If any treatment is required, I understand that every effort will be made to notify the individual indicated as emergency contact beforehand by telephone.

The Undersigned hereby forever releases, discharges, and covenants to hold harmless the Cobb County Parks, Recreation and Cultural Affairs Department, the Cobb County recreation Commission, the Cobb Arts Commission, the Cobb County Board of Commissioners, and Cobb County, Georgia and any other person, firm, or corporation charged or chargeable with responsibility or liability, their heirs, administrators, executors, successors, and assignees from any and all claims, demands, damages, costs, expenses, loss of services, actions and causes of action belonging to the undersigned or arising out of any act or occurrence in connection with and particularly on account of all personal injury disability, property damage, loss of damages of any kind sustained or that may hereafter be sustained arising out of the matters described herein or in consequence of the participation in the recreation program sponsored by the Cobb County Parks, Recreation and Cultural Affairs Department. The undersigned hereby bind their heirs, administrators, executors and successors. Further, this Agreement shall apply to all unknown and unanticipated injuries and damages directly or indirectly resulting here-from. This Release and Hold Harmless Agreement shall constitute a full and complete release of any and all claims.

AGE	NAME	HOME ADDRESS	WHAT COUNTY DO YOU RESIDE IN & DO YOU PAY CITY TAXES?	SIGNATURE
1.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
2.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
3.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
4.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
5.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
6.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	

			YES	
7.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
8.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
9.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
10.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
11.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
12.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
13.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
14.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
15.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
16.			COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
17.			COUNTY _____	

			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	18.		COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	19.		COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	20.		COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	21.		COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	22.		COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	23.		COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	24.		COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
	25.		COUNTY _____	
			CITY TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
ROSTER LIMIT - 25 (USE BOTTOM 3 TO REPLACE ORIGINAL PLAYERS AFTER THE LIMIT)				
	1.		COUNTY _____	
	2.		COUNTY _____	
	3.		COUNTY _____	

***NOTE* Players must be present to be added to this roster. All players are subject to I.D. checks if requested by the park supervisor/scorekeeper.**